

U.S. Agency for International Development

> Bureau for Global Health

# COUNTRY PROFILE

HIV/AIDS

# **GUYANA**

The Caribbean has the highest prevalence of HIV in the world, outside of sub-Saharan Africa. Guyana has second highest number of reported HIV/AIDS cases in the Caribbean, next to Haiti. It is also one of the five countries in the Latin America and Caribbean region in which HIV has spread beyond at-risk populations into the general population.

Estimated Number of Adults and Children Living with HIV/AIDS (end 2001)	18,000
Total Population (2001)	763,000
Adult HIV Prevalence (end 2001)	2.7%
HIV-1 Seroprevalence in Urban Areas	
Population most at risk (i.e., sex workers and clients, patients with a sexually transmitted infection, or others with known risk factors)	43.6%
Population not at risk (i.e., pregnant women, blood donors, or others with no known risk factors)	3.8%

Sources: UNAIDS, U.S. Census Bureau

The Joint United Nations Programme on HIV/AIDS (UNAIDS) estimates HIV infections occur among 2.7 percent of the general population; however, some Ministry of Health officials believe infection rates may be as high as 3.5 to 5.5 percent. Studies of sex workers in Guyana's capital, Georgetown, have found infection rates as high as 46 percent, and a recent pilot project to prevent mother-to-child transmission found infection rates greater than 4 percent at nine sites.

An estimated 80 percent of new HIV infections occur through heterosexual contact, nearly 20 percent are attributed to same-sex activity, and a small percentage of new infections are the result of intravenous drug use. These estimates, however, are open to debate. For example, homosexual and bisexual transmission are believed to be underreported, and estimates of heterosexual transmission may be too

high. In addition, mother-to-child transmission may also account for up to 3 percent of new HIV infections.

Three-quarters of infections occur among 19- to 35-year-olds, and the majority of these occur in men, although the current trend indicates women are rapidly manifesting a greater proportion of infections. Other vulnerable populations include workers in the gold and bauxite mines and Amerindians, who live in the most remote parts of Guyana. This group is vulnerable to disease and has little access to preventive and curative health services.

## **NATIONAL RESPONSE**

Guyana's national HIV/AIDS strategic plan for 2002–2006 is comprehensive and ambitious. Its goals are to reduce mother-to-child transmission, create better surveillance systems, implement better voluntary counseling and testing services, provide better training for health care professionals, and supply antiretroviral medicines to infected individuals. Guyana's reduction component of the plan includes strategies focusing on abstinence, fidelity, and condom use.



Map of Guyana: PCL Map Collection, University of Texas

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www.usaid.gov

Senior public health leaders express frequent verbal support for HIV mitigation efforts. Unfortunately, staff shortages and imbalances exist throughout the national health care network. The National AIDS Program Secretariat, for example, has an inadequate number of technical people on staff. The condom and drug distribution system is also inadequate, but is currently being improved.

## **USAID SUPPORT**

Funding from the U.S. Agency for International Development (USAID) for HIV/AIDS activities in Guyana is expected to total nearly \$1 million in 2003. Funds in 2003 will be used to continue to strengthen the peer education network sponsored by nongovernmental organizations, implement a national condom social marketing program, upgrade voluntary counseling and testing services, begin the development of a behavioral surveillance system, and provide technical assistance to the National AIDS Program Secretariat. In addition, technical assistance will be provided to the Ministry of Health to develop a child and adolescent health unit.

USAID's primary implementing partners in Guyana are Family Health International and Population Services International. Other partners include John Snow, Inc., The Johns Hopkins University Program for International Education in Gynecology and Obstetrics, and the Centers for Disease Control and Prevention.

#### Youth and HIV/AIDS

The Guyana HIV/AIDS/STI Youth Project is the centerpiece of USAID's intervention efforts in the epidemic. The project is coordinated by nine nongovernmental organizations, and their work targets people aged 8–25 in Georgetown, New Amsterdam, Linden, Bartica, and Hinterland Regions 1 and 8. The objectives are to stimulate dialogue on risk behaviors, promote information about HIV/AIDS and other sexually transmitted infections, and promote responsible sexual behavior. The organizations that manage the project use music, street theater, camps, talk shows, and marches to engage young people and spread HIV prevention messages.

The project recently launched a new web site, www.guyanayouth.com, which offers information on the organizations that form the Youth Project partnership, sexually transmitted infections, counseling approaches, safe sex and other health tips, and national HIV and AIDS data.

### Capacity building

USAID funds in 2003 are being used to train representatives of nongovernmental organizations to improve systems management, develop work plans, promote strategic planning, and begin monitoring and evaluation activities. Through its partners, USAID also provides technical assistance to the Ministry of Health's Materials Management Unit to improve commodity logistics, including condoms. Organizations new to the Youth Project will receive extensive assistance to boost their technical and organizational abilities to match those of the original partners.

With technical assistance from a local accounting firm, nongovernmental organizations at the forefront of the effort to combat HIV, receive training in financial management. Technical support to the Ministry of Health will also continue.

## Condom promotion and commodity management

Supplies of condoms and essential drugs may be adequate, but numerous bottlenecks pervade the distribution system. Improving distributive efficiency for condoms, antiretroviral drugs, and drugs to treat sexually transmitted infections are fundamental to a functioning HIV/AIDS prevention effort. USAID will continue to help Guyana improve its management and distribution of these through the Delivery Project, which is managed by John Snow, Inc. A new condom social marketing initiative, managed by Population Services International, was begun in early 2003.

## Information and education for behavior change

In January 2003, Population Services International began using USAID funds to promote a robust, nationwide information, education, and communication campaign directed at behavior change, particularly among young people aged 15–24, who are at the greatest risk for HIV infection. In the past, with USAID funds, the number of young people receiving anti-HIV/AIDS messages grew from 1,700 in 1999 to more than 40,000 in the first six months of 2001.

In 2002, USAID began using funds to expand HIV/AIDS awareness and prevention activities in all 10 regions of Guyana. Efforts were initiated to bring information and services to the Amerindian populations in the hinterland regions, where open borders and the presence of mining and logging camps lead to greater sexual risk-taking behaviors. With USAID support, innovative indigenous communication materials are being developed with particular attention to addressing specific ethnic and religious groups.

USAID's efforts to engage the Guyanese business and labor sectors in the fight against HIV/AIDS are being managed through the Agency's Democracy, Governance, and Economic Development Strategic Objective.

## Voluntary counseling and testing

It is estimated only one in five infected people in Guyana are aware of their infection. The rationale for voluntary counseling and testing is straightforward, but still not widely accepted. People must learn their HIV status so those who have not contracted the virus have an incentive to remain that way. For those who test positive for HIV, counseling is offered to help them live constructive, active lives; avoid infecting others; and seek medical attention to ward off opportunistic infections such as tuberculosis. Several nongovernmental organizations have the ability to perform pretest and posttest counseling and to draw blood, which is sent to a laboratory in Georgetown, for HIV antibody testing. Other organizations are able to counsel and refer clients to a clinic or hospital for blood analysis.

# **Important Links And Contacts**

### USAID/Guyana

U.S. Embassy 100 Young and Duke Streets P.O. Box 10507 Kingston, Georgetown Guyana Tel. (592) 225-7315 Fax. (592) 225-7316

USAID HIV/AIDS web site for Guyana: http://www.usaid.gov/pop health/aids/Countries/lac/guyana.html

National AIDS Program Ministry of Health Brickdam, Georgetown Guyana

Tel: (592) 226-5371

Prepared for USAID by TvT Global Health and Development Strategies/Social & Scientific Systems, Inc., under The Synergy Project

For more information, see <u>www.usaid.gov/pop/aids</u> or <u>www.synergyaids.com</u>

February 2003

